



Flathead County
Emergency Medical Services
Administrative Board

Flathead County EMS
625 Timberwolf Parkway
Kalispell, MT 59901
406 - 751 -8191
emslife@flathead.mt.gov

July 19th, 2010

Regular Meeting, Flathead Emergency Communications Center, EOC

Members Present

Wayne Miller, MD

Myrt Webb

Bob Kun

Absent

Jason Spring

Velinda Stevens

Others Present

Mary Granger

Tom Kennelly

Dan Diehl

Amanda Norenberg

Scott Sampey

Kris Long

Katie Edwards

Erika Billiet

Bill Norton

Rocco Altobelli

Call to Order

Meeting was called to order by Dr. Miller at 2:00p. Dr. Miller explained that Fran Laukaitis, the alternate for Velinda Stevens from KRMC, has taken a position out of state and he would like to express the Board's gratitude for her commitment and dedication in the reorganization and administration of EMS. A letter will be sent to her from the Board and Staff.

Approval of Agenda

MOTION to approve agenda as received, Webb

SECOND, Kun

Approved

Approval of Minutes

MOTION to approve Minutes of June 7th, 2010, Webb

SECOND, Kun

Approved

Citizen Comments

Dan Diehl of Kalispell Fire Department explained the new patient reporting form developed by KFD will be provided to the EMS Advisory Committee shortly. The form will include the state required fields.

Diehl expressed the Pre-Alert tones are functioning well and are followed by the Agency dispatch tones. Diehl also expressed his concern with the goal of closest resource dispatch. There may be some conflicts with some of the agency run-cards not following the closest resource dispatch. Diehl stated that the citizens should be and will be the priority of KFD and he hopes other agencies have that same priority when building the system.

Miller reminded those attending the meeting that a specific goal of the Study Group, when developing this system, was to dispatch the closest available resource.

Training Committee Report – Rocco Altobelli

Training Subcommittee Progress Report – July 2010

- Members: Chair, Rocco Altobelli (rocco@alpineinstitute.net); Kris Long; Mary Granger; Kathaleen Krass; Scott Rossman. Amanda and Dr. Briles also attend meetings.
- Formed March 2010 by the Flathead EMS Advisory Committee

Current investigation and projects

- Fall 2010 / Winter 2011 Refresher Schedule
 - Terry Gormely will teach 2 EMT-B refreshers (we've added a refresher this year).
 - A job description for the paramedic refresher Lead Instructor has been created and should be posted soon.
 - All refreshers will have a hybrid format of online learning and hands-on skill labs, scenarios, and skills.
- Mary Granger will teach the county sponsored full EMT-B Course.
- Fall 2010 / Winter 2011 Continuing Education (CE) Calendar
 - Looking for ideas.
 - Will do IV refresher endorsement.
 - Rocco Altobelli will teach 1 full ACLS course, 1 full PALS course and 1 recert for each.
 - Looking for a trauma course to sponsor (ATT, PHTLS, etc.).
 - 4 regional (NW, NE, SW, SE county) MCI scenarios.

Online System Investigation

- The Committee's primary focus is making EMS education more effective and providing resources to the different agencies. The Training Committee feels it can make the biggest impact with online learning.
- Online advantages:
 - Consistency
 - Flexible (can be done on A, B or C shift, at home or anywhere-anytime).
 - Peer reviewed lessons
 - Nationally certified (CECBEMS)
 - Verification (post course quiz before credit is awarded).
 - Decreased training officer liability
 - Specific lessons can be made for our county allowing for timely and direct education and verification of county protocols, operation considerations or quality assurance concerns.
 - Most importantly: caters to our busy personal lives, increased professional requirements and decreased availability of scheduled time.
- Online disadvantages
 - Costs: ~\$60/student (about \$16,000/yr for entire county)
 - Can be ineffective if that is the only form of education available.

- Along with an online learning the committee is looking at a web-based integrated learning management system (LMS)
 - Would provide a way for individuals, agencies, the county and medical director to monitor performance and competency.
 - Track certification and licensing for individuals
 - Communicate EMS system information through bulletin boards, emails, and calendars
- Two different online products are being investigated, including
 - Centrelearn.com
 - 24/7
- Three LMS models:
 1. The county administers a single plan with everyone belonging to this single plan.
 2. The units administer their own system.
 3. The mixed plan (*Preferred alternative by the committee*). Larger agencies administer their own LMS with link to county system, and the county has one group for smaller agencies and unassigned members (FVCC students, boarder patrol, etc.).

Future investigations / projects

- Co-host September 2011 Rocky Mountain Rural Trauma Symposium with KRMCC.
- Develop a scholarship program for local members to attend national conference.
- Develop a quality assurance program (instructors, paramedics and EMT's).
- Create a mobile training classroom with high-fidelity simulators.

Miller complimented the Training Committee for their efforts and progress.

Consider Committee Creation -Webb

Webb expressed the need to create two specific subcommittees of the board. Following discussion Dr. Miller appointed Webb and Spring to the Budget Subcommittee and Kun and Stevens to the Operations Subcommittee

EMS Manager's Report –Granger

1. Units have all been transferred to Dr. Briles as the Medical Director on the HIRMS website.
2. Database of information regarding responder information has been compiled by Norenberg and she will continue to update the information.
3. A record notebook of Units, their license level, with personnel and their license level has been compiled to be stored by this office.
4. Contract with Dr. Briles and the responders to clarify authorizations for level of practice are being distributed and signed.

5. Contract between Dr. Briles as Medical Director and the units is being drafted; it needs to be cleared by the attorney before distributing.
6. An agreement between Dr. Briles and the Medical Advisors is still under development.
7. Funding allocations were completed by the end of June and special funding allotments were distributed. The EMS office will continue to monitor the spending of those funds and gathering the invoices needed to guarantee intended use of the money.
8. Run Cards: Run cards are nearing completion. Granger has distributed a copy of the cards to the fire chiefs and has asked them to inform the EMS office of any changes they desire.
 - When cards are completed each chief or Board of Trustees will be asked to sign off to indicate approval of the cards. When this is complete Granger intends to visit with the Board of Trustees of the Districts and the Chiefs to make sure they know what is on the run cards and to be sure they approve the run card information. A log sheet will be established for each district and any changes will then be noted as they occur.
 - Dr. Briles will review the run cards and meet with the Chiefs to discuss any concerns he may have in the requesting and allocation of resources. If concerns are expressed and changes are not made, the EMS office may be forced to go before the Board of Trustees to express those concerns directly.
 - Granger expressed that it is important that we respect the autonomy of the Fire Chiefs, but feels we must request that their run cards reflect the County EMS goals. For example: Nearest resource to be dispatched and run cards that reflect the dispatch protocol for dispatch level of ALS or BLS,
9. Dispatch Protocols and Run Cards—some conflict in the Motor Vehicle Accident Injury card and the MVA Unknown Injury Card—The EMD (emergency medical dispatch protocols) requires an ALS dispatch in both cases. Dr. Briles has looked at that and has made a decision that we will communicate with the Agencies.

The Board asked that Dr. Briles communicate his endorsement of the EMD very clearly and the letter to the Agencies will state that the EMD will override the runcards.

10. Visits to the Agencies: Granger has been making her way to the agencies to reeducate Mass Casualty Training and the county wide protocols developed to insure consistency with the delivery to the hospitals. This was developed with input from the KRMCC ER staff.
11. Patient Care Reports—Have State requirements, HIPAA requirements, and Medicare & Medicaid requirements. KFD is building the PCR template. Dr. Briles will review the template to determine his needs. If he wants to access all PCR's from one source then he must require Agencies to use the same PCR. The Aegus System can accommodate

the PCR's (send to the State, send to the Hospitals, and send to the billing company). An interface must be purchased to link the CAD to the billing software. Central server storage and access by Dr. Brile's will be essential to use it for Quality Assurance and Improvement. Some resistance to the change is being noted but Granger feels the education and training on the system will help alleviate the problem. Some anxiety is being felt from units still using paper trip forms.

Erika Billiet, City of Kalispell IT director explained that an export can be created with the assistance of New World that will interface the patient care reporting system to the billing systems. The export can be written by New World with an estimated cost of \$28,000.00.

Dr. Miller reminded those members attending that the goal of the Study Group was centralized billing and this export would insure the ability for this to happen for all agencies in the future.

12. ALERT meeting – Met w/ Bill Norton and some of the fire chiefs that have made changes to their district runcards to move ALERT to a “requested launch”, rather than an “initial launch” in some areas. Concerns were expressed about the lengthy scene times with ALERT when ALS was already on the scene and Rapid Sequence Intubation or other ALERT only skills were not being used.
13. Bigfork—Granger has met with them and their board to answer some questions. They are actively working on the restructuring of the ambulance service. Bigfork QRU has officially voted to dissolve the corporation and transfer the assets to Bigfork Fire. Run cards were completed on Friday, to be reviewed and approved by the parties that make the decisions.
14. Middle Fork QRU—officially dissolved. Granger has notified Dispatch to no longer dispatch the QRU, but to dispatch the Canyon QRU instead. Granger has discussed this with Ron Sullens (Middle Fork QRU president).

Medical Director Update - Granger

Dr. Briles was unable to attend. Granger explained in her report what the priorities of the Medical Director are at this time.

Advisory Committee report- Long

Long expressed that Granger had reported on the majority of the Advisory Committee's business. The Operations Subcommittee is assisting Granger to develop dispatch standards for Q/A. Some of these standards include a measure of the time from the call being taken by the dispatcher to the time the call is dispatched. It is only a tool to determine what can be done to either speed up the process or if questioning could make a difference.

Long explained that Mary Hill from EMS and Trauma Systems Program, MT Dept. of Public Health and Human Services, was here to do annual Agency inspections. Some agencies fell short in respect to their Sanitation and Maintenance policies. Granger has compiled a file of templates and examples to assist these agencies.

There are requests for funding that the Advisory Committee has requested proposals from:

- The Critical Incident Stress Management Team is requesting reimbursement for time and resources.
- The Rural Trauma Symposium 2011 is requesting support both personnel and funding to insure local providers may attend.
- The Fire Service Area is asking for funding to reimburse the medical calls in the area.

After the proposals are made, the Advisory Committee will report their recommendations to the Board.

The office of Emergency Services has adopted the Mass Casualty trailer from DPPHS. It is one of seven in the state and holds equipment for up to 100 patients. This is a State resource and may be used for training without the use of the disposable supplies.

Other Business/future Agenda Requests

Long expressed that FVCC has been granted a \$2.9 million grant to be used for the Nursing and Pre-Hospital programs. Long will keep the Board up to date as more information is available.

Where to hold board meetings? The next Board meeting will be held at the Whitefish Fire station including a tour and visit from the City Manager.

Board Member Comments

None

Public Meeting Adjourned 3:50p

Executive Session – Personnel

Meeting Adjourned 4:04p

